Case 1:24-cr-20255-WPD Document 235-28 Entered on FLSD Docket 11/07/2025 Page 1 of 28

From: King Kimchi <consulting012345@gmail.com>

Sent: Thur 10/15/2020 10:35:20 PM (UTC)

To: compliance@safechain.com, CharlesB@safechain.com, AbbieD@safechain.com

Attachment: Binder-012599654-62.pdf

GOVERNMENT EXHIBIT 358 1:24-cr-20255-WPD

Drug Supply Chain Security Act Document

(TI) Transaction Information

Drug Name, Strength, Dosage Form, Container Size: SYMTUZA 800MG/150MG/200MG/10MG 30TAB

NDC: 59676-800-30

| Lot Number | Quantity | Exp |
|------------|----------|---------|
| 19DG231 | 1 | 07/2021 |
| | | |
| | | |

01259654 Reference Number: INVOICE **Document Type:**

NEW YORK, NY 10032-8210

12/06/2020 Reference Date:

(TH) Transaction History

Manufacturer's Name: Janssen Pharmaceuticals, Inc.

Manufacturer's information1000 U.S. Route 202 South, Raritan, NJ 08869

SHIPPED TO: SOLD TO: Name: AMERISOURCEBERGEN DRUG CORP. Name: AMERISOURCEBERGEN DRUG CORP. 5500 NEW HORIZONS BLVD 5500 NEW HORIZONS BLVD Address: Address: **NORTH AMITYVILLE, NY 11701-1156** NORTH AMITYVILLE, NY 11701-1156 Date Received & Ref: Date Purchased & Ref: 07/22/19 07/22/19 PO#A141244 SOLD TO: SHIPPED TO: Name: **AMSTERDAM WELLNESS PHARMACY INC** AMSTERDAM WELLNESS PHARMACY INC Name:

2091 AMSTERDAM AVE 2091 AMSTERDAM AVE Address:

Address: **NEW YORK, NY 10032-8210**

Date Purchased & Ref: PO#20191009 10/09/19 Date Received & Ref: 10/09/19

SOLD TO: SHIPPED TO:

Name: **BOULEVARD 9229 LLC BOULEVARD 9229 LLC** Name: 9229 QUEENS BLVD STE 9229 QUEENS BLVD STE Address: Address: 11 REGO PARK, NY 11374 11 REGO PARK, NY 11374

Date Purchased & Ref: 12/06/19 12/06/19 Date Received & Ref: PO#01259654

SOLD TO: SHIPPED TO: Name: Name: Address: Address: Date Purchased & Ref: Date Received & Ref:

SOLD TO: SHIPPED TO: Name: Name: Address: Address: Date Purchased & Ref: Date Received & Ref:

(TS) Transaction Statement: This Company complied with each applicable subsection of FDCA Sec. 581 (27) (A) – (G)

- (A) is authorized as required under the Drug Supply Chain Security Act;
- (B) received the product from a person that is authorized as required under the Drug Supply Chain Security Act;
- (C) received transaction information and a transaction statement from the prior owner of the product, as required under section 582;
- (D) did not knowingly ship a suspect or illegitimate product;
- (E) had systems and processes in place to comply with verification requirements under section 582;
- (F) did not knowingly provide false transaction information; and
- (G) did not knowingly alter the transaction history.

Drug Supply Chain Security Act Document

(TI) Transaction Information

Drug Name, Strength, Dosage Form, Container Size: SYMTUZA 800MG/150MG/200MG/10MG 30TAB

NDC: 59676-800-30

| Lot Number | Quantity | Ехр |
|------------|----------|---------|
| 19HG416 | 1 | 09/2021 |
| | | |
| | | |

Reference Number: 01259654
Document Type: INVOICE

Reference Date: 12/06/2020

(TH) Transaction History

Manufacturer's Name: Janssen Pharmaceuticals, Inc.

Manufacturer's information1000 U.S. Route 202 South, Raritan, NJ 08869

SHIPPED TO: SOLD TO: Name: AMERISOURCEBERGEN DRUG CORP. Name: AMERISOURCEBERGEN DRUG CORP. 5500 NEW HORIZONS BLVD 5500 NEW HORIZONS BLVD Address: Address: **NORTH AMITYVILLE, NY 11701-1156** NORTH AMITYVILLE, NY 11701-1156 Date Received & Ref: Date Purchased & Ref: 07/18/19 07/18/19 PO#A141238 SOLD TO: SHIPPED TO: Name: **AMSTERDAM WELLNESS PHARMACY INC** AMSTERDAM WELLNESS PHARMACY INC Name:

Address: 2091 AMSTERDAM AVE Address: 2091 AMSTERDAM AVE

Address: NEW YORK, NY 10032-8210 Address: NEW YORK, NY 10032-8210

Date Purchased & Ref: 10/04/19 PO#20191004 Date Received & Ref: 10/04/19

SOLD TO: SHIPPED TO:

Name: BOULEVARD 9229 LLC
Address: 9229 QUEENS BLVD STE
11 REGO PARK, NY 11374

Name: BOULEVARD 9229 LLC
Address: 9229 QUEENS BLVD STE
11 REGO PARK, NY 11374

Date Purchased & Ref: 12/06/19 PO#01259654 Date Received & Ref: 12/06/19

SOLD TO:
Name:
Address:

Date Purchased & Ref:

SHIPPED TO:
Name:
Address:

Date Received & Ref:

SOLD TO:
Name:

SHIPPED TO:
Name:

Address: Address:

Date Purchased & Ref : Date Received & Ref :

(TS) Transaction Statement: This Company complied with each applicable subsection of FDCA Sec. 581 (27) (A) – (G)

- (A) is authorized as required under the Drug Supply Chain Security Act;
- (B) received the product from a person that is authorized as required under the Drug Supply Chain Security Act;
- (C) received transaction information and a transaction statement from the prior owner of the product, as required under section 582;
- (D) did not knowingly ship a suspect or illegitimate product;
- (E) had systems and processes in place to comply with verification requirements under section 582;
- (F) did not knowingly provide false transaction information; and
- (G) did not knowingly alter the transaction history.

Drug Supply Chain Security Act Document

(TI) Transaction Information

Drug Name, Strength, Dosage Form, Container Size: SYMTUZA 800MG/150MG/200MG/10MG 30TAB

NDC: 59676-800-30

Name:

Address:

Date Purchased & Ref:

| Lot Number | Quantity | Ехр |
|------------|----------|---------|
| 19MG726 | 3 | 01/2022 |
| | | |
| | | |

Reference Number: 01259654

Document Type: INVOICE

Reference Date: 12/06/2020

(TH) Transaction History

Manufacturer's Name: Janssen Pharmaceuticals, Inc.

Manufacturer's information1000 U.S. Route 202 South, Raritan, NJ 08869

SHIPPED TO: SOLD TO: Name: AMERISOURCEBERGEN DRUG CORP. Name: AMERISOURCEBERGEN DRUG CORP. 5500 NEW HORIZONS BLVD 5500 NEW HORIZONS BLVD Address: Address: **NORTH AMITYVILLE, NY 11701-1156** NORTH AMITYVILLE, NY 11701-1156 Date Received & Ref: Date Purchased & Ref: 07/19/19 07/19/19 PO#A141241 SOLD TO: SHIPPED TO: Name: AMSTERDAM WELLNESS PHARMACY INC AMSTERDAM WELLNESS PHARMACY INC Name: 2091 AMSTERDAM AVE 2091 AMSTERDAM AVE Address: Address: **NEW YORK, NY 10032-8210** NEW YORK, NY 10032-8210 Date Purchased & Ref: PO#20191009 10/09/19 Date Received & Ref: 10/09/19 SOLD TO: SHIPPED TO: Name: **BOULEVARD 9229 LLC BOULEVARD 9229 LLC** Name: 9229 QUEENS BLVD STE 9229 QUEENS BLVD STE Address: Address: 11 REGO PARK, NY 11374 11 REGO PARK, NY 11374 Date Purchased & Ref: 12/06/19 12/06/19 Date Received & Ref: PO#01259654 SOLD TO: SHIPPED TO:

Date Purchased & Ref :

SOLD TO:
Name:
Address:

Date Received & Ref :

SHIPPED TO:
Name:
Address:

Name:

Address:

Date Received & Ref:

(TS) Transaction Statement: This Company complied with each applicable subsection of FDCA Sec. 581 (27) (A) - (G)

- (A) is authorized as required under the Drug Supply Chain Security Act;
- (B) received the product from a person that is authorized as required under the Drug Supply Chain Security Act;
- (C) received transaction information and a transaction statement from the prior owner of the product, as required under section 582;
- (D) did not knowingly ship a suspect or illegitimate product;
- (E) had systems and processes in place to comply with verification requirements under section 582;
- (F) did not knowingly provide false transaction information; and
- (G) did not knowingly alter the transaction history.

Drug Supply Chain Security Act Document

(TI) Transaction Information

Drug Name, Strength, Dosage Form, Container Size: SYMTUZA 800MG/150MG/200MG/10MG 30TAB

NDC: 59676-800-30

| 1120.000.0000 | | |
|---------------|----------|---------|
| Lot Number | Quantity | Exp |
| 19MG727X | 1 | 05/2022 |
| | | |
| | | |

01259654 Reference Number: INVOICE **Document Type:**

12/06/2020 Reference Date:

(TH) Transaction History

Manufacturer's Name: Janssen Pharmaceuticals, Inc.

Manufacturer's information1000 U.S. Route 202 South, Raritan, NJ 08869

SHIPPED TO: SOLD TO: Name: AMERISOURCEBERGEN DRUG CORP. Name: AMERISOURCEBERGEN DRUG CORP. 5500 NEW HORIZONS BLVD 5500 NEW HORIZONS BLVD Address: Address: **NORTH AMITYVILLE, NY 11701-1156** NORTH AMITYVILLE, NY 11701-1156 Date Received & Ref: Date Purchased & Ref: 07/17/19 07/17/19 PO#A141236 SOLD TO: SHIPPED TO: Name: AMSTERDAM WELLNESS PHARMACY INC AMSTERDAM WELLNESS PHARMACY INC Name: 2091 AMSTERDAM AVE 2091 AMSTERDAM AVE Address: Address: **NEW YORK, NY 10032-8210** NEW YORK, NY 10032-8210 Date Purchased & Ref: PO#20191009 10/09/19 Date Received & Ref: 10/09/19 SOLD TO: SHIPPED TO: Name: **BOULEVARD 9229 LLC BOULEVARD 9229 LLC** Name: 9229 QUEENS BLVD STE 9229 QUEENS BLVD STE Address: Address: 11 REGO PARK, NY 11374 11 REGO PARK, NY 11374 Date Purchased & Ref: 12/06/19

SOLD TO: SHIPPED TO: Name: Name: Address: Address: Date Purchased & Ref: Date Received & Ref:

Date Received & Ref:

SOLD TO: SHIPPED TO: Name: Name: Address: Address: Date Purchased & Ref: Date Received & Ref:

(TS) Transaction Statement: This Company complied with each applicable subsection of FDCA Sec. 581 (27) (A) – (G)

(A) is authorized as required under the Drug Supply Chain Security Act;

12/06/19

(B) received the product from a person that is authorized as required under the Drug Supply Chain Security Act;

PO#01259654

- (C) received transaction information and a transaction statement from the prior owner of the product, as required under section 582;
- (D) did not knowingly ship a suspect or illegitimate product;
- (E) had systems and processes in place to comply with verification requirements under section 582;
- (F) did not knowingly provide false transaction information; and
- (G) did not knowingly alter the transaction history.

Drug Supply Chain Security Act Document

(TI) Transaction Information

Drug Name, Strength, Dosage Form, Container Size:

PREZCOBIX 800MG/150MG 30TAB

NDC: 59676-575-30

| Lot Number | Quantity | Exp |
|------------|----------|---------|
| 20CG988 | 2 | 02/2022 |
| | | |
| | | |

01259654 Reference Number: INVOICE **Document Type:**

12/06/2020 Reference Date:

(TH) Transaction History

Manufacturer's Name: Janssen Pharmaceuticals, Inc.

Manufacturer's information1000 U.S. Route 202 South, Raritan, NJ 08869

SHIPPED TO: SOLD TO:

Name: AMERISOURCEBERGEN DRUG CORP.

5500 NEW HORIZONS BLVD Address:

NORTH AMITYVILLE, NY 11701-1156

Date Purchased & Ref: 08/14/19

Name: AMERISOURCEBERGEN DRUG CORP.

2091 AMSTERDAM AVE

NEW YORK, NY 10032-8210

5500 NEW HORIZONS BLVD Address:

NORTH AMITYVILLE, NY 11701-1156

Date Received & Ref: 08/14/19 PO#A141296

SOLD TO: SHIPPED TO:

Name: AMSTERDAM WELLNESS PHARMACY INC AMSTERDAM WELLNESS PHARMACY INC Name:

2091 AMSTERDAM AVE Address: Address: **NEW YORK, NY 10032-8210**

Date Purchased & Ref: PO#20191022 10/22/19 Date Received & Ref: 10/22/19

SOLD TO: SHIPPED TO:

Name: **BOULEVARD 9229 LLC BOULEVARD 9229 LLC** Name: 9229 QUEENS BLVD STE 9229 QUEENS BLVD STE Address: Address:

11 REGO PARK, NY 11374 11 REGO PARK, NY 11374

Date Purchased & Ref: 12/06/19 12/06/19 Date Received & Ref: PO#01259654

SOLD TO: SHIPPED TO: Name: Name: Address: Address:

Date Purchased & Ref: Date Received & Ref:

SOLD TO: SHIPPED TO: Name: Name: Address: Address:

Date Purchased & Ref: Date Received & Ref:

(TS) Transaction Statement: This Company complied with each applicable subsection of FDCA Sec. 581 (27) (A) – (G)

- (A) is authorized as required under the Drug Supply Chain Security Act;
- (B) received the product from a person that is authorized as required under the Drug Supply Chain Security Act;
- (C) received transaction information and a transaction statement from the prior owner of the product, as required under section 582;
- (D) did not knowingly ship a suspect or illegitimate product;
- (E) had systems and processes in place to comply with verification requirements under section 582;
- (F) did not knowingly provide false transaction information; and
- (G) did not knowingly alter the transaction history.

Drug Supply Chain Security Act Document

(TI) Transaction Information

Drug Name, Strength, Dosage Form, Container Size:

PREZCOBIX 800MG/150MG 30TAB

NDC: 59676-575-30

| Lot Number | Quantity | Exp |
|------------|----------|---------|
| 20DG048 | 1 | 03/2022 |
| | | |
| | | |

01259654 Reference Number: INVOICE **Document Type:**

12/06/2020 Reference Date:

(TH) Transaction History

Manufacturer's Name: Janssen Pharmaceuticals, Inc.

Manufacturer's information1000 U.S. Route 202 South, Raritan, NJ 08869

SHIPPED TO: SOLD TO:

Name: AMERISOURCEBERGEN DRUG CORP.

5500 NEW HORIZONS BLVD Address:

NORTH AMITYVILLE, NY 11701-1156

Name:

AMERISOURCEBERGEN DRUG CORP. 5500 NEW HORIZONS BLVD Address:

NORTH AMITYVILLE, NY 11701-1156

Date Received & Ref: Date Purchased & Ref: 08/14/19 08/14/19 PO#A141296

SOLD TO: SHIPPED TO:

Name: AMSTERDAM WELLNESS PHARMACY INC

2091 AMSTERDAM AVE Address:

NEW YORK, NY 10032-8210

Date Purchased & Ref: PO#20191023 10/23/19

AMSTERDAM WELLNESS PHARMACY INC Name:

10/23/19

2091 AMSTERDAM AVE Address: NEW YORK, NY 10032-8210

SOLD TO:

Address:

Name: **BOULEVARD 9229 LLC** 9229 QUEENS BLVD STE

Address: 11 REGO PARK, NY 11374

SHIPPED TO:

Date Received & Ref:

BOULEVARD 9229 LLC Name: 9229 QUEENS BLVD STE Address: 11 REGO PARK, NY 11374

Date Purchased & Ref: 12/06/19 12/06/19 Date Received & Ref: PO#01259654

SOLD TO: Name: Address:

SHIPPED TO: Name: Address:

Date Purchased & Ref: Date Received & Ref:

SOLD TO: Name:

Name: Address:

SHIPPED TO:

Date Purchased & Ref: Date Received & Ref:

(TS) Transaction Statement: This Company complied with each applicable subsection of FDCA Sec. 581 (27) (A) – (G)

- (A) is authorized as required under the Drug Supply Chain Security Act;
- (B) received the product from a person that is authorized as required under the Drug Supply Chain Security Act;
- (C) received transaction information and a transaction statement from the prior owner of the product, as required under section 582;
- (D) did not knowingly ship a suspect or illegitimate product;
- (E) had systems and processes in place to comply with verification requirements under section 582;
- (F) did not knowingly provide false transaction information; and
- (G) did not knowingly alter the transaction history.

Drug Supply Chain Security Act Document

(TI) Transaction Information

Drug Name, Strength, Dosage Form, Container Size: SYMTUZA 800MG/150MG/200MG/10MG 30TAB

NDC: 59676-800-30

| Lot Number | Quantity | Exp |
|------------|----------|---------|
| 20EG062 | 3 | 01/2023 |
| | | |
| | | |

Reference Number: 01259654

Document Type: INVOICE

Reference Date: 12/06/2020

(TH) Transaction History

Manufacturer's Name: Janssen Pharmaceuticals, Inc.

Manufacturer's information1000 U.S. Route 202 South, Raritan, NJ 08869

SOLD TO:

SHIPPED TO:

Name: AMERISOURCEBERGEN DRUG CORP. Name: AMERISOURCEBERGEN DRUG CORP.

Address: 5500 NEW HORIZONS BLVD NORTH AMITYVILLE, NY 11701-1156 Address: 5500 NEW HORIZONS BLVD NORTH AMITYVILLE, NY 11701-1156

Date Purchased & Ref: 07/30/19 PO#A141265 Date Received & Ref: 07/30/19

SOLD TO: SHIPPED TO:

Name: AMSTERDAM WELLNESS PHARMACY INC Name: AMSTERDAM WELLNESS PHARMACY INC

Address: 2091 AMSTERDAM AVE NEW YORK, NY 10032-8210 Address: 2091 AMSTERDAM AVE NEW YORK, NY 10032-8210

Date Purchased & Ref: 10/09/19 PO#20191009 Date Received & Ref: 10/09/19

SOLD TO: SHIPPED TO:

Name: BOULEVARD 9229 LLC
Address: BOULEVARD 9229 LLC

Date Purchased & Ref : 12/06/19 PO#01259654 | Date Received & Ref : 12/06/19

SOLD TO:
Name:
Address:
SHIPPED TO:
Name:
Address:

Date Purchased & Ref : Date Received & Ref :

SOLD TO:
Name:
Address:

SHIPPED TO:
Name:
Address:

(TS) Transaction Statement: This Company complied with each applicable subsection of FDCA Sec. 581 (27) (A) – (G)

Date Received & Ref:

- (A) is authorized as required under the Drug Supply Chain Security Act;
- (B) received the product from a person that is authorized as required under the Drug Supply Chain Security Act;
- (C) received transaction information and a transaction statement from the prior owner of the product, as required under section 582;
- (D) did not knowingly ship a suspect or illegitimate product;
- (E) had systems and processes in place to comply with verification requirements under section 582;
- (F) did not knowingly provide false transaction information; and
- (G) did not knowingly alter the transaction history.

Date Purchased & Ref:

Drug Supply Chain Security Act Document

(TI) Transaction Information

Drug Name, Strength, Dosage Form, Container Size: SYMTUZA 800MG/150MG/200MG/10MG 30TAB

NDC: 59676-800-30

| Lot Number | Quantity | Exp |
|------------|----------|---------|
| 20GG129 | 4 | 02/2023 |
| | | |
| | | |

Reference Number: 01259654

Document Type: INVOICE

Reference Date: 12/06/2020

(TH) Transaction History

Date Purchased & Ref:

Date Purchased & Ref:

SOLD TO:

Address:

Name:

Manufacturer's Name: Janssen Pharmaceuticals, Inc.

Manufacturer's information1000 U.S. Route 202 South, Raritan, NJ 08869

SHIPPED TO: SOLD TO: Name: AMERISOURCEBERGEN DRUG CORP. Name: AMERISOURCEBERGEN DRUG CORP. 5500 NEW HORIZONS BLVD 5500 NEW HORIZONS BLVD Address: Address: **NORTH AMITYVILLE, NY 11701-1156** NORTH AMITYVILLE, NY 11701-1156 Date Received & Ref: Date Purchased & Ref: 07/29/19 07/29/19 PO#A141262 SOLD TO: SHIPPED TO: Name: AMSTERDAM WELLNESS PHARMACY INC AMSTERDAM WELLNESS PHARMACY INC Name: 2091 AMSTERDAM AVE 2091 AMSTERDAM AVE Address: Address: **NEW YORK, NY 10032-8210** NEW YORK, NY 10032-8210 Date Purchased & Ref: PO#20191009 10/09/19 Date Received & Ref: 10/09/19 SOLD TO: SHIPPED TO: Name: **BOULEVARD 9229 LLC BOULEVARD 9229 LLC** Name: 9229 QUEENS BLVD STE 9229 QUEENS BLVD STE Address: Address: 11 REGO PARK, NY 11374 11 REGO PARK, NY 11374 Date Purchased & Ref: 12/06/19 12/06/19 Date Received & Ref: PO#01259654 SOLD TO: SHIPPED TO: Name: Name: Address: Address:

(TS) Transaction Statement: This Company complied with each applicable subsection of FDCA Sec. 581 (27) (A) – (G)

Date Received & Ref:

Date Received & Ref:

SHIPPED TO:

Name:

Address:

- (A) is authorized as required under the Drug Supply Chain Security Act;
- (B) received the product from a person that is authorized as required under the Drug Supply Chain Security Act;
- (C) received transaction information and a transaction statement from the prior owner of the product, as required under section 582;
- (D) did not knowingly ship a suspect or illegitimate product;
- (E) had systems and processes in place to comply with verification requirements under section 582;
- (F) did not knowingly provide false transaction information; and
- (G) did not knowingly alter the transaction history.

Drug Supply Chain Security Act Document

(TI) Transaction Information

Drug Name, Strength, Dosage Form, Container Size:

SYMTUZA 800MG/150MG/200MG/10MG 30TAB

NDC: 59676-800-30

| Lot Number | Quantity | Exp |
|------------|----------|---------|
| 20GG131 | 2 | 01/2023 |
| | | |
| | | |

01259654 Reference Number: INVOICE **Document Type:**

12/06/2020 Reference Date:

(TH) Transaction History

Manufacturer's Name: Janssen Pharmaceuticals, Inc.

Manufacturer's information1000 U.S. Route 202 South, Raritan, NJ 08869

SHIPPED TO: SOLD TO: Name: AMERISOURCEBERGEN DRUG CORP.

5500 NEW HORIZONS BLVD

Address:

NORTH AMITYVILLE, NY 11701-1156

Name: AMERISOURCEBERGEN DRUG CORP.

5500 NEW HORIZONS BLVD Address:

NORTH AMITYVILLE, NY 11701-1156

Date Received & Ref: Date Purchased & Ref: 08/01/19 08/01/19 PO#A141268

SOLD TO: SHIPPED TO:

Name: **AMSTERDAM WELLNESS PHARMACY INC** AMSTERDAM WELLNESS PHARMACY INC Name:

2091 AMSTERDAM AVE 2091 AMSTERDAM AVE Address: Address: **NEW YORK, NY 10032-8210** NEW YORK, NY 10032-8210

Date Purchased & Ref: PO#20191027 10/27/19 Date Received & Ref: 10/27/19

SOLD TO: SHIPPED TO: Name: **BOULEVARD 9229 LLC** Name:

BOULEVARD 9229 LLC 9229 QUEENS BLVD STE 9229 QUEENS BLVD STE Address: Address: 11 REGO PARK, NY 11374 11 REGO PARK, NY 11374

Date Purchased & Ref: 12/06/19 12/06/19 Date Received & Ref: PO#01259654

SOLD TO: SHIPPED TO: Name: Name: Address: Address: Date Purchased & Ref: Date Received & Ref:

SOLD TO: SHIPPED TO:

Name: Name: Address: Address:

Date Purchased & Ref: Date Received & Ref:

(TS) Transaction Statement: This Company complied with each applicable subsection of FDCA Sec. 581 (27) (A) – (G)

- (A) is authorized as required under the Drug Supply Chain Security Act;
- (B) received the product from a person that is authorized as required under the Drug Supply Chain Security Act;
- (C) received transaction information and a transaction statement from the prior owner of the product, as required under section 582;
- (D) did not knowingly ship a suspect or illegitimate product;
- (E) had systems and processes in place to comply with verification requirements under section 582;
- (F) did not knowingly provide false transaction information; and
- (G) did not knowingly alter the transaction history.

Drug Supply Chain Security Act Document

(TI) Transaction Information

Drug Name, Strength, Dosage Form, Container Size:

PREZCOBIX 800MG/150MG 30TAB

NDC: 59676-575-30

| Lot Number | Quantity | Exp |
|------------|----------|---------|
| 20HG193 | 1 | 06/2022 |
| | | |
| | | |

01259654 Reference Number: INVOICE **Document Type:**

12/06/2020 Reference Date:

(TH) Transaction History

Date Purchased & Ref:

Manufacturer's Name: Janssen Pharmaceuticals, Inc.

Manufacturer's information1000 U.S. Route 202 South, Raritan, NJ 08869

08/08/19

SHIPPED TO: SOLD TO:

Name: AMERISOURCEBERGEN DRUG CORP.

5500 NEW HORIZONS BLVD Address:

NORTH AMITYVILLE, NY 11701-1156

SOLD TO:

PO#A141285

Name: **AMSTERDAM WELLNESS PHARMACY INC** 2091 AMSTERDAM AVE

Address:

NEW YORK, NY 10032-8210

Date Purchased & Ref: PO#20191023 10/23/19

SHIPPED TO:

Date Received & Ref:

Name:

Address:

AMSTERDAM WELLNESS PHARMACY INC Name:

5500 NEW HORIZONS BLVD

AMERISOURCEBERGEN DRUG CORP.

NORTH AMITYVILLE, NY 11701-1156

08/08/19

2091 AMSTERDAM AVE Address:

NEW YORK, NY 10032-8210

Date Received & Ref: 10/23/19

SOLD TO:

Name: **BOULEVARD 9229 LLC** 9229 QUEENS BLVD STE Address:

11 REGO PARK, NY 11374

Date Purchased & Ref: 12/06/19 SHIPPED TO:

BOULEVARD 9229 LLC Name: 9229 QUEENS BLVD STE Address:

11 REGO PARK, NY 11374

12/06/19 Date Received & Ref: PO#01259654

SOLD TO: Name: Address:

Date Purchased & Ref:

SHIPPED TO:

Name: Address:

Date Received & Ref:

SOLD TO: SHIPPED TO: Name: Name: Address: Address:

Date Purchased & Ref: Date Received & Ref:

(TS) Transaction Statement: This Company complied with each applicable subsection of FDCA Sec. 581 (27) (A) – (G)

- (A) is authorized as required under the Drug Supply Chain Security Act;
- (B) received the product from a person that is authorized as required under the Drug Supply Chain Security Act;
- (C) received transaction information and a transaction statement from the prior owner of the product, as required under section 582;
- (D) did not knowingly ship a suspect or illegitimate product;
- (E) had systems and processes in place to comply with verification requirements under section 582;
- (F) did not knowingly provide false transaction information; and
- (G) did not knowingly alter the transaction history.

Drug Supply Chain Security Act Document

(TI) Transaction Information

Drug Name, Strength, Dosage Form, Container Size: SYMTUZA 800MG/150MG/200MG/10MG 30TAB

NDC: 59676-800-30

| Lot Number | Quantity | Exp |
|------------|----------|---------|
| 20HG203 | 3 | 03/2023 |
| | | |
| | | |

Reference Number: 01259654
Document Type: INVOICE

Reference Date: 12/06/2020

(TH) Transaction History

Manufacturer's Name: Janssen Pharmaceuticals, Inc.

Manufacturer's information1000 U.S. Route 202 South, Raritan, NJ 08869

SHIPPED TO: SOLD TO: Name: AMERISOURCEBERGEN DRUG CORP. Name: AMERISOURCEBERGEN DRUG CORP. 5500 NEW HORIZONS BLVD 5500 NEW HORIZONS BLVD Address: Address: **NORTH AMITYVILLE, NY 11701-1156** NORTH AMITYVILLE, NY 11701-1156 Date Received & Ref: Date Purchased & Ref: 07/22/19 07/22/19 PO#A141244 SOLD TO: SHIPPED TO: Name: **AMSTERDAM WELLNESS PHARMACY INC** AMSTERDAM WELLNESS PHARMACY INC Name: 2091 AMSTERDAM AVE 2091 AMSTERDAM AVE Address: Address: **NEW YORK, NY 10032-8210** NEW YORK, NY 10032-8210 Date Purchased & Ref: PO#20191009 10/09/19 Date Received & Ref: 10/09/19

SOLD TO:
Name: BOULEVARD 9229 LLC
Address: 9229 QUEENS BLVD STE

SHIPPED TO:
Name: BOULEVARD 9229 LLC
Address: 9229 QUEENS BLVD STE

11 REGO PARK, NY 11374 11 REGO PARK, NY 11374

Date Purchased & Ref: 12/06/19 PO#01259654 Date Received & Ref: 12/06/19

 SOLD TO:
 SHIPPED TO:

 Name:
 Name:

 Address:
 Address:

 Date Purchased & Ref :
 Date Received & Ref :

(TS) Transaction Statement: This Company complied with each applicable subsection of FDCA Sec. 581 (27) (A) - (G)

- (A) is authorized as required under the Drug Supply Chain Security Act;
- (B) received the product from a person that is authorized as required under the Drug Supply Chain Security Act;
- (C) received transaction information and a transaction statement from the prior owner of the product, as required under section 582;
- (D) did not knowingly ship a suspect or illegitimate product;
- (E) had systems and processes in place to comply with verification requirements under section 582;
- (F) did not knowingly provide false transaction information; and
- (G) did not knowingly alter the transaction history.

Drug Supply Chain Security Act Document

(TI) Transaction Information

Drug Name, Strength, Dosage Form, Container Size: SYMTUZA 800MG/150MG/200MG/10MG 30TAB

NDC: 59676-800-30

| Lot Number | Quantity | Exp |
|------------|----------|---------|
| 20MG726 | 2 | 01/2022 |
| | | |
| | | |

Reference Number: 01259654

Document Type: INVOICE

Reference Date: 12/06/2020

(TH) Transaction History

Manufacturer's Name: Janssen Pharmaceuticals, Inc.

Manufacturer's information1000 U.S. Route 202 South, Raritan, NJ 08869

SHIPPED TO: SOLD TO: Name: AMERISOURCEBERGEN DRUG CORP. Name: AMERISOURCEBERGEN DRUG CORP. 5500 NEW HORIZONS BLVD 5500 NEW HORIZONS BLVD Address: Address: **NORTH AMITYVILLE, NY 11701-1156** NORTH AMITYVILLE, NY 11701-1156 Date Received & Ref: Date Purchased & Ref: 08/01/19 08/01/19 PO#A141268 SOLD TO: SHIPPED TO: Name: **AMSTERDAM WELLNESS PHARMACY INC** AMSTERDAM WELLNESS PHARMACY INC Name: 2091 AMSTERDAM AVE 2091 AMSTERDAM AVE Address: Address: **NEW YORK, NY 10032-8210** NEW YORK, NY 10032-8210 Date Purchased & Ref: PO#20191004 10/04/19 Date Received & Ref: 10/04/19 SOLD TO: SHIPPED TO: Name: **BOULEVARD 9229 LLC BOULEVARD 9229 LLC** Name: 9229 QUEENS BLVD STE 9229 QUEENS BLVD STE Address: Address: 11 REGO PARK, NY 11374 11 REGO PARK, NY 11374 Date Purchased & Ref: 12/06/19 12/06/19 Date Received & Ref: PO#01259654

SOLD TO:
Name:
Address:

Date Purchased & Ref :

SHIPPED TO:
Name:
Address:
Date Received & Ref :

 SOLD TO:
 SHIPPED TO:

 Name:
 Name:

 Address:
 Address:

 Date Purchased & Ref :
 Date Received & Ref :

(TS) Transaction Statement: This Company complied with each applicable subsection of FDCA Sec. 581 (27) (A) – (G)

- (A) is authorized as required under the Drug Supply Chain Security Act;
- (B) received the product from a person that is authorized as required under the Drug Supply Chain Security Act;
- (C) received transaction information and a transaction statement from the prior owner of the product, as required under section 582;
- (D) did not knowingly ship a suspect or illegitimate product;
- (E) had systems and processes in place to comply with verification requirements under section 582;
- (F) did not knowingly provide false transaction information; and
- (G) did not knowingly alter the transaction history.

Drug Supply Chain Security Act Document

(TI) Transaction Information

Drug Name, Strength, Dosage Form, Container Size:

ATRIPLA 600MG/200MG/300MG 30TAB

NDC: 15584-0101-1

| Lot Number | Quantity | Exp |
|------------|----------|---------|
| 015512 | 1 | 07/2022 |
| | | |
| | | |

01259654 Reference Number: INVOICE **Document Type:**

12/06/2020 Reference Date:

(TH) Transaction History

Manufacturer's Name: Gilead Sciences, Inc.

Manufacturer's information333 Lakeside Drive, Foster City, CA 94404

SHIPPED TO: SOLD TO:

Name: AMERISOURCEBERGEN DRUG CORP. 5500 NEW HORIZONS BLVD

Address:

NORTH AMITYVILLE, NY 11701-1156

Date Purchased & Ref: 08/08/19

Name: AMERISOURCEBERGEN DRUG CORP.

BOULEVARD 9229 LLC

9229 QUEENS BLVD STE

11 REGO PARK, NY 11374

5500 NEW HORIZONS BLVD Address:

NORTH AMITYVILLE, NY 11701-1156

Date Received & Ref: 08/08/19 PO#A141285

SHIPPED TO:

Address:

Name:

Address:

SOLD TO: SHIPPED TO:

Name: **AMSTERDAM WELLNESS PHARMACY INC** AMSTERDAM WELLNESS PHARMACY INC Name: 2091 AMSTERDAM AVE

2091 AMSTERDAM AVE Address: **NEW YORK, NY 10032-8210**

NEW YORK, NY 10032-8210

Date Purchased & Ref: PO#20191022 10/22/19 Date Received & Ref: 10/22/19

SOLD TO:

Name: **BOULEVARD 9229 LLC** 9229 QUEENS BLVD STE Address:

11 REGO PARK, NY 11374

Date Purchased & Ref: 12/06/19 12/06/19 Date Received & Ref: PO#01259654

SOLD TO: SHIPPED TO: Name: Name: Address: Address:

Date Purchased & Ref: Date Received & Ref:

SOLD TO: SHIPPED TO: Name: Name: Address: Address:

Date Purchased & Ref: Date Received & Ref:

(TS) Transaction Statement: This Company complied with each applicable subsection of FDCA Sec. 581 (27) (A) – (G)

- (A) is authorized as required under the Drug Supply Chain Security Act;
- (B) received the product from a person that is authorized as required under the Drug Supply Chain Security Act;
- (C) received transaction information and a transaction statement from the prior owner of the product, as required under section 582;
- (D) did not knowingly ship a suspect or illegitimate product;
- (E) had systems and processes in place to comply with verification requirements under section 582;
- (F) did not knowingly provide false transaction information; and
- (G) did not knowingly alter the transaction history.

Drug Supply Chain Security Act Document

(TI) Transaction Information

Drug Name, Strength, Dosage Form, Container Size:

ATRIPLA 600MG/200MG/300MG 30TAB

NDC: 15584-0101-1

| Lot Number | Quantity | Exp |
|------------|----------|---------|
| 015851 | 1 | 10/2022 |
| | | |
| | | |

Reference Number: 01259654

Document Type: INVOICE

Reference Date: 12/06/2020

(TH) Transaction History

Manufacturer's Name: Gilead Sciences, Inc.

Manufacturer's information333 Lakeside Drive, Foster City, CA 94404

SHIPPED TO: SOLD TO: Name: AMERISOURCEBERGEN DRUG CORP. Name: AMERISOURCEBERGEN DRUG CORP. 5500 NEW HORIZONS BLVD 5500 NEW HORIZONS BLVD Address: Address: **NORTH AMITYVILLE, NY 11701-1156** NORTH AMITYVILLE, NY 11701-1156 Date Received & Ref: Date Purchased & Ref: 08/08/19 08/08/19 PO#A141285 SOLD TO: SHIPPED TO: Name: **AMSTERDAM WELLNESS PHARMACY INC** AMSTERDAM WELLNESS PHARMACY INC Name: 2091 AMSTERDAM AVE 2091 AMSTERDAM AVE Address: Address: **NEW YORK, NY 10032-8210** NEW YORK, NY 10032-8210 Date Purchased & Ref: PO#20191017 10/17/19 Date Received & Ref: 10/17/19 SOLD TO: SHIPPED TO: Name: **BOULEVARD 9229 LLC BOULEVARD 9229 LLC** Name: 9229 QUEENS BLVD STE 9229 QUEENS BLVD STE Address: Address: 11 REGO PARK, NY 11374 11 REGO PARK, NY 11374 Date Purchased & Ref: 12/06/19 12/06/19 Date Received & Ref: PO#01259654 SOLD TO: SHIPPED TO: Name: Name: Address: Address: Date Purchased & Ref: Date Received & Ref: SOLD TO: SHIPPED TO: Name: Name: Address: Address:

(TS) Transaction Statement: This Company complied with each applicable subsection of FDCA Sec. 581 (27) (A) – (G)

Date Received & Ref:

- (A) is authorized as required under the Drug Supply Chain Security Act;
- (B) received the product from a person that is authorized as required under the Drug Supply Chain Security Act;
- (C) received transaction information and a transaction statement from the prior owner of the product, as required under section 582;
- (D) did not knowingly ship a suspect or illegitimate product;
- (E) had systems and processes in place to comply with verification requirements under section 582;
- (F) did not knowingly provide false transaction information; and
- (G) did not knowingly alter the transaction history.

Date Purchased & Ref:

Drug Supply Chain Security Act Document

(TI) Transaction Information

Drug Name, Strength, Dosage Form, Container Size:

ATRIPLA 600MG/200MG/300MG 30TAB

NDC: 15584-0101-1

| Lot Number | Quantity | Exp |
|------------|----------|---------|
| 016331 | 1 | 10/2022 |
| | | |
| | | |

Reference Number: 01259654
Document Type: INVOICE

Reference Date: 12/06/2020

(TH) Transaction History

Manufacturer's Name: Gilead Sciences, Inc.

Manufacturer's information333 Lakeside Drive, Foster City, CA 94404

SHIPPED TO: SOLD TO: Name: AMERISOURCEBERGEN DRUG CORP. Name: AMERISOURCEBERGEN DRUG CORP. 5500 NEW HORIZONS BLVD 5500 NEW HORIZONS BLVD Address: Address: **NORTH AMITYVILLE, NY 11701-1156** NORTH AMITYVILLE, NY 11701-1156 Date Received & Ref: Date Purchased & Ref: 08/05/19 08/05/19 PO#A141275 SOLD TO: SHIPPED TO: Name: **AMSTERDAM WELLNESS PHARMACY INC** AMSTERDAM WELLNESS PHARMACY INC Name: 2091 AMSTERDAM AVE 2091 AMSTERDAM AVE Address: Address: **NEW YORK, NY 10032-8210** NEW YORK, NY 10032-8210 Date Purchased & Ref: PO#20191010 Date Received & Ref: 10/10/19 10/10/19 SOLD TO: SHIPPED TO: Name: **BOULEVARD 9229 LLC BOULEVARD 9229 LLC** Name: 9229 QUEENS BLVD STE 9229 QUEENS BLVD STE Address: Address: 11 REGO PARK, NY 11374 11 REGO PARK, NY 11374 Date Purchased & Ref: 12/06/19 12/06/19 Date Received & Ref: PO#01259654 SOLD TO: SHIPPED TO: Name: Name: Address: Address: Date Purchased & Ref: Date Received & Ref: SOLD TO: SHIPPED TO: Name: Name: Address: Address:

(TS) Transaction Statement: This Company complied with each applicable subsection of FDCA Sec. 581 (27) (A) – (G)

Date Received & Ref:

- (A) is authorized as required under the Drug Supply Chain Security Act;
- (B) received the product from a person that is authorized as required under the Drug Supply Chain Security Act;
- (C) received transaction information and a transaction statement from the prior owner of the product, as required under section 582;
- (D) did not knowingly ship a suspect or illegitimate product;
- (E) had systems and processes in place to comply with verification requirements under section 582;
- (F) did not knowingly provide false transaction information; and
- (G) did not knowingly alter the transaction history.

Date Purchased & Ref:

Drug Supply Chain Security Act Document

(TI) Transaction Information

Drug Name, Strength, Dosage Form, Container Size:

COMPLERA 200MG/25MG/300MG 30TAB

NDC: 61958-1101-1

| Lot Number | Quantity | Exp |
|------------|----------|---------|
| 016338 | 1 | 08/2021 |
| | | |
| | | |

Reference Number: 01259654

Document Type: INVOICE

Reference Date: 12/06/2020

(TH) Transaction History

Manufacturer's Name: Gilead Sciences, Inc.

Manufacturer's information333 Lakeside Drive, Foster City, CA 94404

SHIPPED TO: SOLD TO: Name: AMERISOURCEBERGEN DRUG CORP. Name: AMERISOURCEBERGEN DRUG CORP. 5500 NEW HORIZONS BLVD 5500 NEW HORIZONS BLVD Address: Address: **NORTH AMITYVILLE, NY 11701-1156** NORTH AMITYVILLE, NY 11701-1156 Date Received & Ref: Date Purchased & Ref: 07/29/19 07/29/19 PO#A141262 SOLD TO: SHIPPED TO: Name: **AMSTERDAM WELLNESS PHARMACY INC** AMSTERDAM WELLNESS PHARMACY INC Name: 2091 AMSTERDAM AVE 2091 AMSTERDAM AVE Address: Address: **NEW YORK, NY 10032-8210** NEW YORK, NY 10032-8210 Date Purchased & Ref: PO#20191010 Date Received & Ref: 10/10/19 10/10/19

SOLD TO: SHIPPED TO:

Name: BOULEVARD 9229 LLC
Address: 9229 QUEENS BLVD STE
11 REGO PARK, NY 11374

Name: BOULEVARD 9229 LLC
Address: 9229 QUEENS BLVD STE
11 REGO PARK, NY 11374

Date Purchased & Ref: 12/06/19 PO#01259654 Date Received & Ref: 12/06/19

 SOLD TO:
 SHIPPED TO:

 Name:
 Name:

 Address:
 Address:

 Date Purchased & Ref :
 Date Received & Ref :

SOLD TO:
Name:
Address:

SHIPPED TO:
Name:
Address:

Date Purchased & Ref : Date Received & Ref :

(TS) Transaction Statement: This Company complied with each applicable subsection of FDCA Sec. 581 (27) (A) – (G)

- (A) is authorized as required under the Drug Supply Chain Security Act;
- (B) received the product from a person that is authorized as required under the Drug Supply Chain Security Act;
- (C) received transaction information and a transaction statement from the prior owner of the product, as required under section 582;
- (D) did not knowingly ship a suspect or illegitimate product;
- (E) had systems and processes in place to comply with verification requirements under section 582;
- (F) did not knowingly provide false transaction information; and
- (G) did not knowingly alter the transaction history.

Drug Supply Chain Security Act Document

SHIPPED TO:

(TI) Transaction Information

Drug Name, Strength, Dosage Form, Container Size:

COMPLERA 200MG/25MG/300MG 30TAB

NDC: 61958-1101-1

SOLD TO:

| Lot Number | Quantity | Exp |
|------------|----------|---------|
| 016339 | 1 | 08/2021 |
| | | |
| | | |

Reference Number: 01259654
Document Type: INVOICE

Reference Date: 12/06/2020

AMERISOURCEBERGEN DRUG CORP.

NORTH AMITYVILLE, NY 11701-1156

5500 NEW HORIZONS BLVD

(TH) Transaction History

Manufacturer's Name: Gilead Sciences, Inc.

Manufacturer's information333 Lakeside Drive, Foster City, CA 94404

Name: AMERISOURCEBERGEN DRUG CORP.

Address: 5500 NEW HORIZONS BLVD
NORTH AMITYVILLE, NY 11701-1156

Name: Address:

Date Purchased & Ref: 07/29/19 PO#A141262 Date Received & Ref: 07/29/19

SOLD TO: SHIPPED TO:

Name: AMSTERDAM WELLNESS PHARMACY INC Name: AMSTERDAM WELLNESS PHARMACY INC

Address: 2091 AMSTERDAM AVE NEW YORK, NY 10032-8210 Address: 2091 AMSTERDAM AVE NEW YORK, NY 10032-8210

Date Purchased & Ref: 10/10/19 PO#20191010 Date Received & Ref: 10/10/19

SOLD TO: SHIPPED TO:

Name: BOULEVARD 9229 LLC
Address: 9229 QUEENS BLVD STE
11 REGO PARK, NY 11374

Name: BOULEVARD 9229 LLC
Address: 9229 QUEENS BLVD STE
11 REGO PARK, NY 11374

Date Purchased & Ref : 12/06/19 PO#01259654 | Date Received & Ref : 12/06/19

SOLD TO:
Name:
Address:
SHIPPED TO:
Name:
Address:

Date Purchased & Ref : Date Received & Ref :

SOLD TO:
Name:
Address:
SHIPPED TO:
Name:
Address:

Date Purchased & Ref : Date Received & Ref :

(TS) Transaction Statement: This Company complied with each applicable subsection of FDCA Sec. 581 (27) (A) – (G)

- (A) is authorized as required under the Drug Supply Chain Security Act;
- (B) received the product from a person that is authorized as required under the Drug Supply Chain Security Act;
- (C) received transaction information and a transaction statement from the prior owner of the product, as required under section 582;
- (D) did not knowingly ship a suspect or illegitimate product;
- (E) had systems and processes in place to comply with verification requirements under section 582;
- (F) did not knowingly provide false transaction information; and
- (G) did not knowingly alter the transaction history.

Drug Supply Chain Security Act Document

(TI) Transaction Information

Drug Name, Strength, Dosage Form, Container Size:

COMPLERA 200MG/25MG/300MG 30TAB

NDC: 61958-1101-1

| Lot Number | Quantity | Exp |
|------------|----------|---------|
| 016348 | 1 | 09/2021 |
| | | |
| | | |

01259654 Reference Number: INVOICE **Document Type:**

12/06/2020 Reference Date:

(TH) Transaction History

Manufacturer's Name: Gilead Sciences, Inc.

Manufacturer's information333 Lakeside Drive, Foster City, CA 94404

SHIPPED TO: SOLD TO:

Name: AMERISOURCEBERGEN DRUG CORP. 5500 NEW HORIZONS BLVD

Address:

NORTH AMITYVILLE, NY 11701-1156

Date Purchased & Ref:

Name: AMERISOURCEBERGEN DRUG CORP.

5500 NEW HORIZONS BLVD Address:

NORTH AMITYVILLE, NY 11701-1156

Date Received & Ref: 07/22/19 07/22/19 PO#A141244

SOLD TO: SHIPPED TO:

Name: **AMSTERDAM WELLNESS PHARMACY INC** AMSTERDAM WELLNESS PHARMACY INC Name:

2091 AMSTERDAM AVE 2091 AMSTERDAM AVE Address: Address: **NEW YORK, NY 10032-8210** NEW YORK, NY 10032-8210

Date Purchased & Ref: PO#20191004 Date Received & Ref: 10/04/19 10/04/19

SOLD TO:

SHIPPED TO: Name: **BOULEVARD 9229 LLC**

BOULEVARD 9229 LLC Name: 9229 QUEENS BLVD STE 9229 QUEENS BLVD STE Address: Address: 11 REGO PARK, NY 11374 11 REGO PARK, NY 11374

Date Purchased & Ref: 12/06/19 12/06/19 Date Received & Ref: PO#01259654

SOLD TO: SHIPPED TO: Name: Name: Address: Address:

Date Purchased & Ref: Date Received & Ref:

SOLD TO: SHIPPED TO: Name: Name: Address: Address:

Date Purchased & Ref: Date Received & Ref:

(TS) Transaction Statement: This Company complied with each applicable subsection of FDCA Sec. 581 (27) (A) – (G)

- (A) is authorized as required under the Drug Supply Chain Security Act;
- (B) received the product from a person that is authorized as required under the Drug Supply Chain Security Act;
- (C) received transaction information and a transaction statement from the prior owner of the product, as required under section 582;
- (D) did not knowingly ship a suspect or illegitimate product;
- (E) had systems and processes in place to comply with verification requirements under section 582;
- (F) did not knowingly provide false transaction information; and
- (G) did not knowingly alter the transaction history.

Drug Supply Chain Security Act Document

(TI) Transaction Information

Drug Name, Strength, Dosage Form, Container Size:

ATRIPLA 600MG/200MG/300MG 30TAB

NDC: 15584-0101-1

| Lot Number | Quantity | Exp |
|------------|----------|---------|
| 017057 | 1 | 01/2023 |
| | | |
| | | |

Reference Number: 01259654

Document Type: INVOICE

Reference Date: 12/06/2020

(TH) Transaction History

Manufacturer's Name: Gilead Sciences, Inc.

Manufacturer's information 333 Lakeside Drive, Foster City, CA 94404

SHIPPED TO: SOLD TO: Name: AMERISOURCEBERGEN DRUG CORP. Name: AMERISOURCEBERGEN DRUG CORP. 5500 NEW HORIZONS BLVD 5500 NEW HORIZONS BLVD Address: Address: **NORTH AMITYVILLE, NY 11701-1156** NORTH AMITYVILLE, NY 11701-1156 Date Received & Ref: Date Purchased & Ref: 08/08/19 08/08/19 PO#A141285 SOLD TO: SHIPPED TO: Name: **AMSTERDAM WELLNESS PHARMACY INC** AMSTERDAM WELLNESS PHARMACY INC Name: 2091 AMSTERDAM AVE 2091 AMSTERDAM AVE Address: Address: **NEW YORK, NY 10032-8210** NEW YORK, NY 10032-8210 Date Purchased & Ref: PO#20191022 10/22/19 Date Received & Ref: 10/22/19 SOLD TO: SHIPPED TO: Name: **BOULEVARD 9229 LLC BOULEVARD 9229 LLC** Name: 9229 QUEENS BLVD STE 9229 QUEENS BLVD STE Address: Address: 11 REGO PARK, NY 11374 11 REGO PARK, NY 11374 Date Purchased & Ref: 12/06/19 12/06/19 Date Received & Ref: PO#01259654 SOLD TO: SHIPPED TO: Name: Name: Address: Address: Date Purchased & Ref: Date Received & Ref: SOLD TO: SHIPPED TO: Name: Name: Address: Address:

(TS) Transaction Statement: This Company complied with each applicable subsection of FDCA Sec. 581 (27) (A) - (G)

Date Received & Ref:

- (A) is authorized as required under the Drug Supply Chain Security Act;
- (B) received the product from a person that is authorized as required under the Drug Supply Chain Security Act;
- (C) received transaction information and a transaction statement from the prior owner of the product, as required under section 582;
- (D) did not knowingly ship a suspect or illegitimate product;
- (E) had systems and processes in place to comply with verification requirements under section 582;
- (F) did not knowingly provide false transaction information; and
- (G) did not knowingly alter the transaction history.

Date Purchased & Ref:

Drug Supply Chain Security Act Document

(TI) Transaction Information

Drug Name, Strength, Dosage Form, Container Size:

COMPLERA 200MG/25MG/300MG 30TAB

NDC: 61958-1101-1

| Lot Number | Quantity | Exp |
|------------|----------|---------|
| 018830 | 3 | 08/2021 |
| | | |
| | | |

01259654 Reference Number: INVOICE **Document Type:**

12/06/2020 Reference Date:

(TH) Transaction History

Manufacturer's Name: Gilead Sciences, Inc.

Manufacturer's information333 Lakeside Drive, Foster City, CA 94404

SHIPPED TO: SOLD TO: AMERISOURCEBERGEN DRUG CORP.

Name: 5500 NEW HORIZONS BLVD

Address: **NORTH AMITYVILLE, NY 11701-1156**

Date Purchased & Ref: 07/22/19 PO#A141244

Name: AMERISOURCEBERGEN DRUG CORP.

5500 NEW HORIZONS BLVD Address:

NORTH AMITYVILLE, NY 11701-1156

Date Received & Ref: 07/22/19

SOLD TO: SHIPPED TO:

Name: **AMSTERDAM WELLNESS PHARMACY INC** Name:

2091 AMSTERDAM AVE Address:

NEW YORK, NY 10032-8210

Date Purchased & Ref: PO#20191024 10/24/19

AMSTERDAM WELLNESS PHARMACY INC

2091 AMSTERDAM AVE Address: NEW YORK, NY 10032-8210

Date Received & Ref: 10/24/19

SOLD TO:

Name: **BOULEVARD 9229 LLC** 9229 QUEENS BLVD STE Address:

11 REGO PARK, NY 11374

Date Purchased & Ref: 12/06/19 PO#01259654 SHIPPED TO:

Name:

Address:

BOULEVARD 9229 LLC Name: 9229 QUEENS BLVD STE Address: 11 REGO PARK, NY 11374

12/06/19 Date Received & Ref: SHIPPED TO:

SOLD TO: Name: Address:

Date Received & Ref:

Date Purchased & Ref: SHIPPED TO:

SOLD TO: Name: Name: Address: Address:

Date Purchased & Ref: Date Received & Ref:

(TS) Transaction Statement: This Company complied with each applicable subsection of FDCA Sec. 581 (27) (A) – (G)

- (A) is authorized as required under the Drug Supply Chain Security Act;
- (B) received the product from a person that is authorized as required under the Drug Supply Chain Security Act;
- (C) received transaction information and a transaction statement from the prior owner of the product, as required under section 582;
- (D) did not knowingly ship a suspect or illegitimate product;
- (E) had systems and processes in place to comply with verification requirements under section 582;
- (F) did not knowingly provide false transaction information; and
- (G) did not knowingly alter the transaction history.

Drug Supply Chain Security Act Document

(TI) Transaction Information

Drug Name, Strength, Dosage Form, Container Size:

ATRIPLA 600MG/200MG/300MG 30TAB

NDC: 15584-0101-1

| Lot Number | Quantity | Exp |
|------------|----------|---------|
| 019276 | 1 | 04/2023 |
| | | |
| | | |

01259654 Reference Number: INVOICE **Document Type:**

12/06/2020 Reference Date:

(TH) Transaction History

Manufacturer's Name: Gilead Sciences, Inc.

Manufacturer's information333 Lakeside Drive, Foster City, CA 94404

SHIPPED TO: SOLD TO:

Name: AMERISOURCEBERGEN DRUG CORP.

5500 NEW HORIZONS BLVD Address:

NORTH AMITYVILLE, NY 11701-1156

Name: AMERISOURCEBERGEN DRUG CORP.

5500 NEW HORIZONS BLVD Address:

NORTH AMITYVILLE, NY 11701-1156

Date Received & Ref: Date Purchased & Ref: 08/14/19 08/14/19 PO#A141296

SOLD TO: SHIPPED TO:

Name: **AMSTERDAM WELLNESS PHARMACY INC** AMSTERDAM WELLNESS PHARMACY INC Name:

2091 AMSTERDAM AVE 2091 AMSTERDAM AVE Address: Address: NEW YORK, NY 10032-8210 NEW YORK, NY 10032-8210

Date Purchased & Ref: PO#20191022 10/22/19 Date Received & Ref: 10/22/19

SOLD TO: SHIPPED TO:

Name: **BOULEVARD 9229 LLC BOULEVARD 9229 LLC** Name: 9229 QUEENS BLVD STE 9229 QUEENS BLVD STE Address: Address:

11 REGO PARK, NY 11374 11 REGO PARK, NY 11374

Date Purchased & Ref: 12/06/19 12/06/19 Date Received & Ref: PO#01259654

SOLD TO: SHIPPED TO: Name: Name: Address: Address:

Date Purchased & Ref: Date Received & Ref:

SOLD TO: SHIPPED TO: Name: Name: Address: Address:

Date Purchased & Ref: Date Received & Ref:

(TS) Transaction Statement: This Company complied with each applicable subsection of FDCA Sec. 581 (27) (A) – (G)

- (A) is authorized as required under the Drug Supply Chain Security Act;
- (B) received the product from a person that is authorized as required under the Drug Supply Chain Security Act;
- (C) received transaction information and a transaction statement from the prior owner of the product, as required under section 582;
- (D) did not knowingly ship a suspect or illegitimate product;
- (E) had systems and processes in place to comply with verification requirements under section 582;
- (F) did not knowingly provide false transaction information; and
- (G) did not knowingly alter the transaction history.

Drug Supply Chain Security Act Document

(TI) Transaction Information

Drug Name, Strength, Dosage Form, Container Size:

COMPLERA 200MG/25MG/300MG 30TAB

NDC: 61958-1101-1

| Lot Number | Quantity | Exp |
|------------|----------|---------|
| 019427 | 2 | 01/2022 |
| | | |
| | | |

01259654 Reference Number: INVOICE

Document Type: 12/06/2020 Reference Date:

(TH) Transaction History

Manufacturer's Name: Gilead Sciences, Inc.

Manufacturer's information333 Lakeside Drive, Foster City, CA 94404

SHIPPED TO: SOLD TO:

Name: AMERISOURCEBERGEN DRUG CORP.

5500 NEW HORIZONS BLVD Address:

NORTH AMITYVILLE, NY 11701-1156

Name: AMERISOURCEBERGEN DRUG CORP.

5500 NEW HORIZONS BLVD Address:

NORTH AMITYVILLE, NY 11701-1156

Date Received & Ref: Date Purchased & Ref: 08/08/19 08/08/19 PO#A141285

SOLD TO: SHIPPED TO:

Name: **AMSTERDAM WELLNESS PHARMACY INC** AMSTERDAM WELLNESS PHARMACY INC Name:

2091 AMSTERDAM AVE 2091 AMSTERDAM AVE Address: Address: **NEW YORK, NY 10032-8210** NEW YORK, NY 10032-8210

Date Purchased & Ref: PO#20191004 Date Received & Ref: 10/04/19 10/04/19

SOLD TO: SHIPPED TO:

Name: **BOULEVARD 9229 LLC BOULEVARD 9229 LLC** Name: 9229 QUEENS BLVD STE 9229 QUEENS BLVD STE Address: Address: 11 REGO PARK, NY 11374 11 REGO PARK, NY 11374

Date Purchased & Ref: 12/06/19 12/06/19 Date Received & Ref: PO#01259654

SOLD TO: SHIPPED TO: Name: Name: Address: Address:

Date Purchased & Ref: Date Received & Ref:

SOLD TO: SHIPPED TO: Name: Name: Address: Address:

Date Purchased & Ref: Date Received & Ref:

(TS) Transaction Statement: This Company complied with each applicable subsection of FDCA Sec. 581 (27) (A) – (G)

- (A) is authorized as required under the Drug Supply Chain Security Act;
- (B) received the product from a person that is authorized as required under the Drug Supply Chain Security Act;
- (C) received transaction information and a transaction statement from the prior owner of the product, as required under section 582;
- (D) did not knowingly ship a suspect or illegitimate product;
- (E) had systems and processes in place to comply with verification requirements under section 582;
- (F) did not knowingly provide false transaction information; and
- (G) did not knowingly alter the transaction history.

Drug Supply Chain Security Act Document

(TI) Transaction Information

Drug Name, Strength, Dosage Form, Container Size:

RAYOS 5 MG 30TAB

NDC: 75987-022-01

| 1155. 75507-522-51 | | |
|--------------------|----------|---------|
| Lot Number | Quantity | Exp |
| 19190020A | 20 | 11/2021 |
| | | |
| | | |

 Reference Number:
 01259654

 Document Type:
 INVOICE

 Reference Date:
 12/06/2020

(TH) Transaction History

Manufacturer's Name: Horizon Pharma USA, Inc.

Manufacturer's informationTwo Tower Place, 12th Floor, South San Francisco, CA 94080

SOLD TO: SHIPPED TO: Name: AMERISOURCEBERGEN DRUG CORP. AMERISOURCEBERGEN DRUG CORP. Name: 5500 NEW HORIZONS BLVD 5500 NEW HORIZONS BLVD Address: Address: **NORTH AMITYVILLE, NY 11701-1156** NORTH AMITYVILLE, NY 11701-1156 Date Received & Ref: Date Purchased & Ref: 07/16/19 07/16/19 PO#A141232 SOLD TO: SHIPPED TO: Name: **AMSTERDAM WELLNESS PHARMACY INC** AMSTERDAM WELLNESS PHARMACY INC Name: 2091 AMSTERDAM AVE 2091 AMSTERDAM AVE Address: Address: **NEW YORK, NY 10032-8210** NEW YORK, NY 10032-8210 Date Purchased & Ref: PO#20191017 10/17/19 Date Received & Ref: 10/17/19 SOLD TO: SHIPPED TO: Name: **BOULEVARD 9229 LLC BOULEVARD 9229 LLC** Name: 9229 QUEENS BLVD STE 9229 QUEENS BLVD STE Address: Address: 11 REGO PARK, NY 11374 11 REGO PARK, NY 11374 Date Purchased & Ref: 12/06/19 12/06/19 Date Received & Ref: PO#01259654 SOLD TO: SHIPPED TO: Name: Name: Address: Address: Date Purchased & Ref: Date Received & Ref: SOLD TO: SHIPPED TO: Name: Name: Address: Address:

(TS) Transaction Statement: This Company complied with each applicable subsection of FDCA Sec. 581 (27) (A) – (G)

Date Received & Ref:

- (A) is authorized as required under the Drug Supply Chain Security Act;
- (B) received the product from a person that is authorized as required under the Drug Supply Chain Security Act;
- (C) received transaction information and a transaction statement from the prior owner of the product, as required under section 582;
- (D) did not knowingly ship a suspect or illegitimate product;
- (E) had systems and processes in place to comply with verification requirements under section 582;
- (F) did not knowingly provide false transaction information; and
- (G) did not knowingly alter the transaction history.

Date Purchased & Ref:

Drug Supply Chain Security Act Document

(TI) Transaction Information

Drug Name, Strength, Dosage Form, Container Size:

ATRIPLA 600MG/200MG/300MG 30TAB

NDC: 15584-0101-1

| Lot Number | Quantity | Exp |
|------------|----------|---------|
| U427803A | 1 | 11/2022 |
| | | |
| | | |

Reference Number: 01259654

Document Type: INVOICE

Reference Date: 12/06/2020

(TH) Transaction History

Manufacturer's Name: Gilead Sciences, Inc.

Manufacturer's information 333 Lakeside Drive, Foster City, CA 94404

SHIPPED TO: SOLD TO: Name: AMERISOURCEBERGEN DRUG CORP. Name: AMERISOURCEBERGEN DRUG CORP. 5500 NEW HORIZONS BLVD 5500 NEW HORIZONS BLVD Address: Address: **NORTH AMITYVILLE, NY 11701-1156** NORTH AMITYVILLE, NY 11701-1156 Date Received & Ref: Date Purchased & Ref: 08/21/19 08/21/19 PO#A141306 SOLD TO: SHIPPED TO: Name: **AMSTERDAM WELLNESS PHARMACY INC** AMSTERDAM WELLNESS PHARMACY INC Name: 2091 AMSTERDAM AVE 2091 AMSTERDAM AVE Address: Address: **NEW YORK, NY 10032-8210** NEW YORK, NY 10032-8210 Date Purchased & Ref: PO#20191027 10/27/19 Date Received & Ref: 10/27/19 SOLD TO: SHIPPED TO: Name: **BOULEVARD 9229 LLC BOULEVARD 9229 LLC** Name: 9229 QUEENS BLVD STE 9229 QUEENS BLVD STE Address: Address: 11 REGO PARK, NY 11374 11 REGO PARK, NY 11374 Date Purchased & Ref: 12/06/19 12/06/19 Date Received & Ref: PO#01259654 SOLD TO: SHIPPED TO: Name: Name: Address: Address: Date Purchased & Ref: Date Received & Ref: SOLD TO: SHIPPED TO: Name: Name: Address: Address: Date Purchased & Ref: Date Received & Ref:

(TS) Transaction Statement: This Company complied with each applicable subsection of FDCA Sec. 581 (27) (A) – (G)

- (A) is authorized as required under the Drug Supply Chain Security Act;
- (B) received the product from a person that is authorized as required under the Drug Supply Chain Security Act;
- (C) received transaction information and a transaction statement from the prior owner of the product, as required under section 582;
- (D) did not knowingly ship a suspect or illegitimate product;
- (E) had systems and processes in place to comply with verification requirements under section 582;
- (F) did not knowingly provide false transaction information; and
- (G) did not knowingly alter the transaction history.

Drug Supply Chain Security Act Document

(TI) Transaction Information

Drug Name, Strength, Dosage Form, Container Size:

ATRIPLA 600MG/200MG/300MG 30TAB

NDC: 15584-0101-1

| Lot Number | Quantity | Exp | |
|------------|----------|---------|--|
| U429630A | 1 | 01/2023 | |
| | | | |
| | | | |

Reference Number: 01259654

Document Type: INVOICE

Document Type: INVOICE
Reference Date: 12/06/2020

(TH) Transaction History

Manufacturer's Name: Gilead Sciences, Inc.

Manufacturer's information 333 Lakeside Drive, Foster City, CA 94404

SHIPPED TO: SOLD TO: Name: AMERISOURCEBERGEN DRUG CORP. Name: AMERISOURCEBERGEN DRUG CORP. 5500 NEW HORIZONS BLVD 5500 NEW HORIZONS BLVD Address: Address: **NORTH AMITYVILLE, NY 11701-1156** NORTH AMITYVILLE, NY 11701-1156 Date Received & Ref: Date Purchased & Ref: 08/21/19 08/21/19 PO#A141306 SOLD TO: SHIPPED TO: Name: **AMSTERDAM WELLNESS PHARMACY INC** AMSTERDAM WELLNESS PHARMACY INC Name: 2091 AMSTERDAM AVE 2091 AMSTERDAM AVE Address: Address: **NEW YORK, NY 10032-8210** NEW YORK, NY 10032-8210 Date Purchased & Ref: PO#20191027 10/27/19 Date Received & Ref: 10/27/19 SOLD TO: SHIPPED TO: Name: **BOULEVARD 9229 LLC BOULEVARD 9229 LLC** Name: 9229 QUEENS BLVD STE 9229 QUEENS BLVD STE Address: Address: 11 REGO PARK, NY 11374 11 REGO PARK, NY 11374 Date Purchased & Ref: 12/06/19 12/06/19 Date Received & Ref: PO#01259654 SOLD TO: SHIPPED TO: Name: Name: Address: Address: Date Purchased & Ref: Date Received & Ref: SOLD TO: SHIPPED TO: Name: Name:

(TS) Transaction Statement: This Company complied with each applicable subsection of FDCA Sec. 581 (27) (A) - (G)

Address:

Date Received & Ref:

- (A) is authorized as required under the Drug Supply Chain Security Act;
- (B) received the product from a person that is authorized as required under the Drug Supply Chain Security Act;
- (C) received transaction information and a transaction statement from the prior owner of the product, as required under section 582;
- (D) did not knowingly ship a suspect or illegitimate product;
- (E) had systems and processes in place to comply with verification requirements under section 582;
- (F) did not knowingly provide false transaction information; and
- (G) did not knowingly alter the transaction history.

Address:

Date Purchased & Ref:

Drug Supply Chain Security Act Document

(TI) Transaction Information

Drug Name, Strength, Dosage Form, Container Size:

ATRIPLA 600MG/200MG/300MG 30TAB

NDC: 15584-0101-1

| Lot Number | Quantity | Ехр |
|------------|----------|---------|
| U434179A | 2 | 02/2023 |
| | | |
| | | |

Reference Number: 01259654

Document Type: INVOICE

Reference Date: 12/06/2020

(TH) Transaction History

Manufacturer's Name: Gilead Sciences, Inc.

Manufacturer's information 333 Lakeside Drive, Foster City, CA 94404

SOLD TO: SHIPPED TO:

Name: AMERISOURCEBERGEN DRUG CORP.

Address: 5500 NEW HORIZONS BLVD

NORTH AMITYVILLE, NY 11701-1156

......

Name: AMERISOURCEBERGEN DRUG CORP.

Address: 5500 NEW HORIZONS BLVD

NORTH AMITYVILLE, NY 11701-1156

Date Purchased & Ref: 08/21/19 PO#A141306 Date Received & Ref: 08/21/19

SOLD TO: SHIPPED TO:

Name: AMSTERDAM WELLNESS PHARMACY INC Name: AMSTERDAM WELLNESS PHARMACY INC

Address: 2091 AMSTERDAM AVE NEW YORK, NY 10032-8210 Address: 2091 AMSTERDAM AVE NEW YORK, NY 10032-8210

Date Purchased & Ref : 10/27/19 PO#20191027 | Date Received & Ref : 10/27/19

SOLD TO: SHIPPED TO:

Name: BOULEVARD 9229 LLC
Address: 9229 QUEENS BLVD STE

Name: BOULEVARD 9229 LLC
Address: 9229 QUEENS BLVD STE

11 REGO PARK, NY 11374 11 REGO PARK, NY 11374

Date Purchased & Ref: 12/06/19 PO#01259654 Date Received & Ref: 12/06/19

SOLD TO:
Name:
Address:
SHIPPED TO:
Name:
Address:

Date Purchased & Ref : Date Received & Ref :

SOLD TO:
Name:
Address:
SHIPPED TO:
Name:
Address:
Address:

Date Purchased & Ref : | Date Received & Ref :

(TS) Transaction Statement: This Company complied with each applicable subsection of FDCA Sec. 581 (27) (A) – (G)

- (A) is authorized as required under the Drug Supply Chain Security Act;
- (B) received the product from a person that is authorized as required under the Drug Supply Chain Security Act;
- (C) received transaction information and a transaction statement from the prior owner of the product, as required under section 582;
- (D) did not knowingly ship a suspect or illegitimate product;
- (E) had systems and processes in place to comply with verification requirements under section 582;
- (F) did not knowingly provide false transaction information; and
- (G) did not knowingly alter the transaction history.

Drug Supply Chain Security Act Document

(TI) Transaction Information

Drug Name, Strength, Dosage Form, Container Size:

ATRIPLA 600MG/200MG/300MG 30TAB

NDC: 15584-0101-1

| Lot Number | Quantity | Exp | |
|------------|----------|---------|--|
| U434181 | 1 | 02/2023 | |
| | | | |
| | | | |

Reference Number: 01259654

Document Type: INVOICE

Reference Date: 12/06/2020

(TH) Transaction History

Manufacturer's Name: Gilead Sciences, Inc.

Manufacturer's information 333 Lakeside Drive, Foster City, CA 94404

SHIPPED TO: SOLD TO: Name: AMERISOURCEBERGEN DRUG CORP. Name: AMERISOURCEBERGEN DRUG CORP. 5500 NEW HORIZONS BLVD 5500 NEW HORIZONS BLVD Address: Address: **NORTH AMITYVILLE, NY 11701-1156** NORTH AMITYVILLE, NY 11701-1156 Date Received & Ref: Date Purchased & Ref: 08/21/19 08/21/19 PO#A141306 SOLD TO: SHIPPED TO: Name: **AMSTERDAM WELLNESS PHARMACY INC** AMSTERDAM WELLNESS PHARMACY INC Name: 2091 AMSTERDAM AVE 2091 AMSTERDAM AVE Address: Address: NEW YORK, NY 10032-8210 NEW YORK, NY 10032-8210 Date Purchased & Ref: PO#20191027 10/27/19 Date Received & Ref: 10/27/19 SOLD TO: SHIPPED TO: Name: **BOULEVARD 9229 LLC BOULEVARD 9229 LLC** Name: 9229 QUEENS BLVD STE 9229 QUEENS BLVD STE Address: Address: 11 REGO PARK, NY 11374 11 REGO PARK, NY 11374 Date Purchased & Ref: 12/06/19 12/06/19 Date Received & Ref: PO#01259654 SOLD TO: SHIPPED TO: Name: Name: Address: Address: Date Purchased & Ref: Date Received & Ref: SOLD TO: SHIPPED TO: Name: Name: Address: Address:

(TS) Transaction Statement: This Company complied with each applicable subsection of FDCA Sec. 581 (27) (A) - (G)

Date Received & Ref:

- (A) is authorized as required under the Drug Supply Chain Security Act;
- (B) received the product from a person that is authorized as required under the Drug Supply Chain Security Act;
- (C) received transaction information and a transaction statement from the prior owner of the product, as required under section 582;
- (D) did not knowingly ship a suspect or illegitimate product;
- (E) had systems and processes in place to comply with verification requirements under section 582;
- (F) did not knowingly provide false transaction information; and
- (G) did not knowingly alter the transaction history.

Date Purchased & Ref: